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GOVERNOR

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**Dear Nursing Facility Provider:**

Two months after the Michigan Department of Community Health (MDCH) implemented the use of national standard claim formats and code sets for nursing facilities, 98% of nursing facility providers are submitting electronic claims, and the majority of claims are processing without difficulty. The MDCH has identified the following list of common claim completion errors that account for the majority of claims that are still rejecting:

- ❖ **Patient Pay Amount:** The patient pay amount must be reported if a beneficiary is responsible for making payment. Remember to only report the appropriate patient pay amount **once** for each month.
  - If you split bill, you are responsible for determining the correct patient pay amount for the second bill.
- ❖ **Replacement Claims:** Replacement claims (type of bill 217) are to be used **only** when “replacing” claims that were billed and paid incorrectly. Report the CRN number of the bill to be replaced.
- ❖ **Void/Cancel Claims:** Void/cancel claims (type of bill 218) are to be used **only** when “voiding” a claim that should not have been paid by Medicaid. Report the CRN number of the bill to void/cancel.
- ❖ **From and Through Days:** Be sure to verify that the claim line dates of service and quantity match the number of “from and through” days and does not exceed the total number of days billable for that period.

The claim resolution sessions held in January and February were very successful in assisting nursing facility billers to understand their claim completion errors and to resolve problem claims. One additional claim resolution session has been scheduled to provide another opportunity for billers to work with MDCH staff to address paper or electronic claim-related problems or questions.

**DATE:** March 20, 2003 **TIME:** 1:00 – 4:00 P.M.  
**PLACE:** Michigan Public Health Institute – Interactive Learning Center  
2436 Woodlake Circle, Ste. 380  
Okemos, Michigan 48864

If you would like to register for this session, please call the MDCH at (517) 335-5453. Pre-registration allows MDCH staff to assemble information specific to your particular claims. This enhances their ability to provide you with the assistance you need. If you are unable to attend the claims resolution session, you may call the Provider Inquiry Line at 1-800-292-2550 with any nursing facility billing-related questions. They will assist you by directing your call to the appropriate department staff. You may also e-mail questions to [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov). If you would like to request a copy of the Nursing Facility Billing Information notebook, please call Marcia Lynch at (517) 324-7379.

Nursing facilities currently submitting electronic claims using the EMC version 5 will need to convert to the 837 version 4010 format by October 2003. For information regarding 837 claims testing, contact [AutomatedBilling@michigan.gov](mailto:AutomatedBilling@michigan.gov) or visit the Department's website at [www.michigan.gov/mdch](http://www.michigan.gov/mdch).

Sincerely,

Peter K. Banne

**Patrick Barrie**  
**Deputy Director**  
**Health Programs Administration**